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PTO/SB/83 (01-06)

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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS**

Application Number	10/543,133
Filing Date	July 22, 2005
First Named Inventor	taoz
Art Unit	
Examiner Name	
Attorney Docket Number	79730

**To: Commissioner for Patents
P.O. Box 1460
Alexandria, VA 22313-1460**

Please withdraw me as attorney or agent for the above identified patent application, ~~and~~

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
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The reasons for this request are: Leaving the employ of Customer No. 26288

CORRESPONDENCE ADDRESS

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Name	Olivia Tolan	Registration No.	45,181
Date	June 28, 2008	Telephone No.	

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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